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DOE/RL-95-23 UC-600

1994 Tier Two Emergency and Hazardous Chemical Inventory

Emergency Planning and Community Right-To-Know Act Section 312

Date Published March 1995





Approved for Public Release

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Section I:

Delegation of Signature Authority

United States Government

Department of Energy

memorandum

Richland Field Office

· DATE:

JAN 04 1993

REPLY TO

ATTN OF: EAP: EBD 93-RPA-071

SUBJECT:

DELEGATION OF SIGNATURE AUTHORITY FOR THE EMERGENCY AND

HAZARDOUS CHEMICAL INVENTORY REPORT (SARA 312)

James D. Bauer, Acting Program Manager Office of Environmental Assurance, Permits, and Policy

I hereby delegate signature authority for the Emergency and Hazardous Chemical Inventory Report (SARA 312) to the Program Manager, Office of Environmental Assurance, Permits, and Policy.

Pursuant to 40 CFR Section 370.41, Tier II Emergency and Hazardous Chemical Inventory Form, part (b), signature authority may be delegated to the manager's officially designated representative. This memorandum constitutes formal delegation of such authority to the Program Manager. Office of Environmental Assurance, Permits, and Policy.

Sincerely.

RECEIVED

JAN 07 1993

DOE-RL/CCC 193-EAP-011

Section II:

Tier Two Instructions

Tier Two Instructions

General Information

Submission of this Tier Two form (when requested) is required by Title III of the Superfund Amendments and Reauthorization Act of 1986, Section 312, Public Law 99-499, codified at 42 U.S.C. Section 11022. The purpose of this Tier Two form is to provide State and local officials and the public with specific information on hazardous chemicals present at your facility during the past year.

Certification

The owner or operator or the officially designated representative of the owner or operator must certify that all information included in the Tier Two submission is true, accurate, and complete. On the first page of the Tier Two report, enter your full name and official title. Sign your name and enter the current date. Also, enter the total number of pages included in the Confidential and Non-Confidential Information Sheets as well as all attachments. An original signature is required on at least the first page of the submission. Submissions to the SERC, LEPC, and fire department must each contain an original signature on at least the first page. Subsequent pages must contain either an original signature, a photocopy of the original signature, or a signature stamp. Each page must contain the date on which the original signature was affixed to the first page of the submission and the total number of pages in the submission.

You Must Provide All Information Requested on This Form to Fulfill Tier Two Reporting Requirements

This form may also be used as a worksheet for completing the Tier One form or may be submitted in place of the Tier One form.

Who Must Submit This Form

Section 312 of Title III requires that the owner or operator of a facility submit this Tier Two form if so requested by a State emergency response commission, a local emergency planning committee, or a fire department with jurisdiction over the facility.

This request may apply to the owner or operator of any facility that is required, under regulations implementing the Occupational Safety and Health Act of 1970, to prepare or have available a Material Safety Data Sheet (MSDS) for a hazardous chemical present at the facility. MSDS requirements are specified in the Occupational Safety and Health Administration (OSHA) Hazard Communication Standard, found in Title 29 of the Code of Federal Regulations at §1910.1200.

This form does not have to be submitted if all of the chemicals located at your facility are excluded under Section 311(e) of Title III.

What Chemicals are Included

If you are submitting Tier Two forms in lieu of Tier One, you must report the required information on this Tier Two form for each hazardous chemical present at your facility in quantities equal to or greater than established threshold amounts (discussed below), unless the chemicals are excluded under Section 311(e) of Title III. Hazardous chemicals are any substance for which your facility must maintain an MSDS under OSHA's Hazard Communication Standard.

If you elect to submit Tier One rather than Tier Two, you may still be required to submit Tier Two information upon request.

What Chemicals are Excluded

Section 311(e) of Title III excludes the following substances:

- (i) Any food, food additive, color additive, drug, or cosmetic regulated by the Food and Drug Administration;
- (ii) Any substance present as a solid in any manufactured item to the extent exposure to the substance does not occur under normal conditions of use;
- (iii) Any substance to the extent it is used for personal, family, or household purposes, or is present in the same form and concentration as a product packaged for distribution and use by the general public:

(iv) Any substance to the extent it is used in a research laboratory or a hospital or other medical facility under the direct supervision of a technically qualified individual;

(v) Any substance to the extent it is used in routine agricultural operations or is a fertilizer held for sale

by a retailer to the ultimate customer.

OSHA regulations, §1910.1200(b), stipulate exemptions from the requirement to prepare or have available an MSDS.

Reporting Thresholds

Minimum thresholds have been established for Tier One/Tier Two reporting under Title III, Section 312. These thresholds are as follows:

For Extremely Hazardous Substances (EHSs) designated under section 302 of Title III, the reporting threshold is 500 pounds (or 227 kg.) or the threshold planning quantity (TPQ), whichever is lower;

For all other hazardous chemicals for which facilities are required to have or prepare an MSDS, the minimum reporting threshold is 10,000 pounds (or 4,540 kg.).

You need to report hazardous chemicals that were present at your facility at any time during the previous calendar year at levels that equal or exceed these thresholds. For instructions on threshold determinations for components of mixtures, see "What About Mixtures?" on page 2 of these instructions.

A requesting official may limit the responses required under Tier Two by specifying particular chemicals or groups of chemicals. Such requests apply to hazardous chemicals regardless of established thresholds.

INSTRUCTIONS

Plesase read these instructions carefully. Print or Type all Responses

When to Submit This Form

Owners or operators of facilities that have hazardous chemicals on hand in quantities equal to or greater than set threshold levels must submit either Tier One or Tier Two forms by March 1.

If you choose to submit Tier One, rather than Tier Two, be aware that you may have to submit Tier Two information later, upon request of an authorized official. You must submit the Tier Two form within 30 days of receipt of a written request.

Where to Submit This Form

Send either a completed Tier One form or Tier Two form(s) to each of the following organizations:

- 1. Your State Emergency Response Commission.
- 2. Your Local Emergency Planning Committee.
- 3. The fire department with jurisdiction over your facility.

If a Tier Two form is submitted in response to a request, send the completed form to the requesting agency.

Penalties

Any owner or operator who violates any Tier Two reporting requirements shall be liable to the United States for a civil penalty of up to \$25,000 for each such violation. Each day a violation continues shall constitute a separate violation.

If your Tier Two responses require more than one page use additional forms and fill in the page number at the top of the form.

Reporting Period

Enter the appropriate calendar year, beginning January 1 and ending December 31.

Facility Identification

Enter the full name of your facility (and company identifier where appropriate).

Enter the full street address or state road. If a street address is not available, enter other appropriate identifiers that describe the physical location of your facility (e.g., longitude and latitude). Include city, county, state, and zip code.

§370.41

Enter the primary Standard Industrial Classification (SIC) code and the Dun & Bradstreet number for your facility. The financial officer of your facility should be able to provide the Dun & Bradstreet number. If your firm does not have this information, contact the State or regional office of Dun & Bradstreet to obtain your facility number or have one assigned.

Owner/Operator

Enter the owner's or operator's full name, mailing address, and phone number.

Emergency Contact

Enter the name, title, and work phone number at least one local person or office who can act as a referral if emergency responders need assistance in responding to a chemical accident at the facility.

Provide an emergency phone number where such emergency information will be available 24 hours a day, every day. The requirement is mandatory. The facility must make some arrangement to ensure a 24 hour contact is available.

Identical Information

Check the box indicating indentical information, located below the emergency contacts on the Tier Two form, if the current chemical information being reported is identical to that submitted last year. Chemical descriptions, hazards, amounts, and locations must be provided in this year's form, even if the information is identical to that submitted last year.

Chemical Information: Description, Hazards, Amounts, and Locations

The main section of the Tier Two form requires specific information on amounts and locations of hazardous chemicals, as defined in the OSHA Hazard Communication Standard.

If you choose to indicate that all of the information on a specific hazardous chemical is identical to that submitted last year, check the appropriate optional box provided at the right side of the storage codes and locations on the Tier Two form. Chemical descriptions, hazards, amounts, and locations must be provided even if the information is identical to that submitted last year.

What units should I use?

Calculated all amounts as weight in pounds. To convert gas or liquid volume to weight in pounds, multiply by an appropriate density factor.

· What about mixtures?

If a chemical is part of a mixture, you have the option of reporting either the weight of the entire mixture or only the portion of the mixture that is a particular hazardous chemcial (e.g., if a hazardous solution weights 100 lbs. but is composed of only 5% of a particular hazardous chemcial, you can indicate either 100 lbs. of the mixture or 5 lbs. of the chemical).

The option used for each mixture must be consistent with the option used in your Section 311 reporting. Because EHSs are important to Section 303 planning, EHSs have lower thresholds. The amount of an EHS at a facility (both pure EHS substances and EHSs in mixtures) must be aggregated and purposes of threshold determination. It is suggested that the aggregation calculation be done as a first step in making the threshold determination. Once you determine whether a threshold for an EHS has been reached, you should report either the total weight of the EHS at your facility, or the weight of each mixture containing the EHS.

Chemical Description

1. Enter the Chemical Abstract Service registry number (CAS). For mixtures, enter the CAS number of the mixture as a whole if it has been assigned a number distinct from its constituents. For a mixture that has no CAS number, leave this item blank or report the CAS numbers of as many constituent chemicals as possible.

If you are withholding the name of a chemical in accordance with criteria specified in Title III, Section 322, enter the generic class or category that is structurally descriptive of the chemical (e.g., list toulene diisocyanate as organic isocyanate) and check the box marked Trade Secret. Trade secret information should be submitted to EPA and must include a substantiation. Please refer to EPA's final regulation on

trade secrecy (53 FR 28772, July 29, 1988) for detailed information on how to submit trade secrecy claims.

2. Enter the chemical name or common name of each hazardous chemical.

3. Check box for ALL applicable descriptors: pure or mixture; and solid, liquid, or gas; and whether the chemical is or contains an EHS.

4. If the chemical is a mixture containing an EHS, enter the chemical name of each EHS in the mixture. Example: You have pure chlorine as on hand, as well as two mixtures that contain liquid chlorine. You write "chlorine" and enter the CAS number. Then you check "pure" and "mix"—as well as "liquid" and "gas".

Physical and Health Hazards

For each chemical you have listed, check all the physical and health hazard boxes that apply. These hazard categories are defined in 40 CFR 370.2. The two health hazard categories and three physical hazard categories are a consolidation of the 23 hazard categories defined in the OSHA Hazard Communication Standard, 29 CFR 1910.1200.

HAZARD CATEGORY COMPENSATION FOR REPORTING UNDER SECTIONS 311 AND 312

EPA's hazard categories	OSHA's hazard categories				
Fire Hazard	. Flammable				
	Combustion Liquid				
	Pyrophoric				
	Oxidizer				
Sudden Release of Pressure	Explosive				
	Compressed Gas				
Reactive	. Unstable Reactive				
	Organic Peroxide				
	Water Reactive				
mmediate (Acute) Health Hazards	Highly Toxic				
	Toxic				
	Imitant				
	Sensitizer				
	Corrosive				
	Other hazardous chemicals with an adverse effect with short term exposure.				
Salarrad (Chancis) Lineith Llauned	Carcinogens				
Delayed (Chronic) Health Hazard	Other hazardous chemicals with an adverse effect with long term				
	exposure.				

Maximum Amount

- 1. For each hazardous chemical, estimate the greatest amount present at your facility on any single day during the reporting period.
 - 2. Find the appropriate range value code in Table I.
 - 3. Enter this range value as the Maximum Amount.

TABLE I—REPORTING RANGES

Range Value	Weight range in pounds					
	From (To				
01	0	99				
02	100	999				
03.	1,000	9.999				
04	10,000	99.999				
05	100,000	999,999				
06	1,000,000	9,999,999				
07.	10,000,000	4 9,99 9,999				
80	50,000,000	99,999.999				
09	100,000,000	499,999,999				

TABLE !—REPORTING RANGES—CONTINUED

Range Value	Weight range in pounds							
	From		To					
10	500,000,000		999,999,999					
11	1 hillion		higher than 1 billion					

If you are using this form as a worksheet for completing Tier One, enter the actual weight in pounds in the shaded space below the response blocks. Do this for both Maximum Amount and Average Daily Amount.

Example: You received one large shipment of a solvent mixture last year. The shipment filled five 5,000-gallon storage tanks. You know that the solvent contains 10% benzene, which is a hazardous chemical.

You figure that 10% of 25,000 gallons is 2,500 gallons. You also know that the density of benzene is 7.29 pounds per gallon, so you multiply 2,500 gallons by 7.29 pounds per gallon to get a weight of 18,225 pounds.

Then you look at Table I and find that the range value 04 corresponds to 18,225. You enter 04 as the Maximum Amount.

(If you are using the form as a worksheet for completing a Tier One form, you should write 18,255 in the shaded area.)

Average Daily Amount

1. For each hazardous chemical, estimate the average weight in pounds that was present at your facility during the year.

To do this, total all daily weights and divide by the number of days the chemical was present on the site.

- 2. Find the appropriate range value in Table I.
- 3. Enter this range value as the Average Daily Amount.

Example: The 25,000-gallon shipment of solvent you received last year was gradually used up and completely gone in 315 days. The sum of the daily volume levels in the tank is 4,536,000 gallons. By dividing 4,536,000 gallons by 315 days on-site, you calculate an average daily amount of 14,400 gallons.

You already know that the solvent contains 10% benzene, which is a hazardous chemical. Since 10% of 14,400 is 1,440, you figure that you had an average of 1,440 gallons of benzene. You also know that the density of benzene is 7.29 pounds per gallon, so you multiply 1,440 by 7.29 to get a weight of 10,500 pounds.

Then you look at Table I and find that the range value 04 corresponds to 10,500. You enter 04 as the Average Daily Amount.

(If you are using the form as a worksheet for completing a Tier One form, you should write 10,500 in the shaded area.)

Number of Days On-Site

Enter the number of days that the hazardous chemical was found on-site.

Example: The solvent composed of 10% benzene was present for 315 days at your facility. Enter 315 in the space provided.

Storage Codes and Storage Locations

List all non-confidential chemical locations in this column, along with storage types/conditions associated with each location. Please note that a particular chemical may be located in several places around the facility. Each row of boxes followed by a line represents a unique location for the same chemical.

Storage Codes: Indicate the types and conditions of storage present.

a. Look at Table II.

For each location, find the appropriate storage type and enter the corresponding code in the first box.

b. Look at Table III.

b. A list of site coordinate abbreviations that correspond to buildings, lots, areas, etc. throughout your facility.

c. A description of dikes and other safeguard measures for storage locations throughout your facility. Example: You have benzene in the main room of the main building, and in tank 2 in tank field 10. You attach a site plan with coordinates as follows: main building = G-2, tank field 10 = B-6. Fill in the Storage Location as follows:

B-6 [Tank 2]G-2 [Main room]

Confidential Information

Under Title III.

Section 324, you may elect to withhold location information on a specific chemical from disclosure to the public. If you choose to do so:

• Enter the word "confidential" in the Non-Confidential Location section of the Tier Two form on the

first line of the storage locations.

• On a separate Tier Two Confidential Location Information Sheet, enter the name and CAS number of each chemical for which you are keeping the location confidential.

• Enter the appropriate location and storage information, as described above for non-confidential

locations.

• Attach the Tier Two Confidential Location Information Sheet to the Tier Two form. This separates confidential locations from other information that will be disclosed to the public.

Certification

Instructions for this section are included on page one of these instructions.

For each location, find the appropriate storage types for pressure and temperature conditions. Enter the applicable pressure code in the second box. Enter the applicable temperature code in the third box.

TABLE! !- STORAGE TYPES

Codes	Types of storage	
	A Above ground tank	
	B. Below ground tank	
į	C Tank inside building	
1	D Steel drum	
	E Plastic or non-metallic drum	
	F Can	
	G Carboy	
1	H Silo	
	I Fiber drum	
	J Bag	
1	K Box	
	L Cylinder ·	
	M Glass bottles or jugs	
1	N Plastic bottles or jugs	
(O Tote bin	
1	P Tank wagon	
(Q Rail car	
i	R) Other	

TABLE III—TEMPERATURE AND PRESSURE CONDITIONS

Codes	Storage conditions	
	(Pressure)	
1	Ambient pressure	
2	Greater than ambient pressure	
3	Less than ambient pressure	•
	(Temperature)	
4	Ambient temperature	
5	Greater than ambient temperature	
6	Less than ambient temperature but not cryogenic	
7	Cryogenic conditions	

Example: The benzene in the main building is kept in a tank inside the building, at ambient pressure and less than ambient temperature.

Table II shows you that the code for a tank inside a building is C. Table III shows you that the code for ambient pressure is 1, and the code for less than ambient temperature is 6.

You enter: C 1 6

Storage Locations: Provide a brief description of the precise location of the chemical, so that emergency responders can locate the area easily. You may find it advantageous to provide the optional site plan or site coordinates as explained below.

For each chemical, indicate at a minimum the building or lot. Additionally, where practical, the room or area may be indicated. You may respond in narrative form with appropriate site coordinates or abbreviations.

If the chemical is present in more than one building, lot, or area location, continue your responses down the page as needed. If the chemical exists everywhere at the plant site simultaneously, you may report that the chemical is ubiquitous at the site.

Optional attachments: If you choose to attach one of the following, check the appropriate Attachments box at the bottom of the Tier Two form:

a. A site plan with site coordinates indicated for buildings, lots, areas, etc. throughout your facility.

Section III:

Chemical Index

9513336.2052

1994 TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

CAS Number	Chemical Name	Page #
107-21-1	1,2-ETHANEDIOL	23
57-55-6	1,2-PROPANEDIOL	1
74-86-2	ACETYLENE	2
7784-27-2	ALUMINUM NITRATE NONAHYDRATE	5
1344-28-1	ALUMINUM OXIDE	6
10043-01-3	ALUMINUM SULFATE DIHYDRATE	8
1113-38-8	AMMONIUM OXLATE	8
7783-20-2	AMMONIUM SULFATE	9
7440-37-1	ARGON	9
75-63-8	BROMOTRIFLUOROMETHANE	10
1333-86-4	CARBON BLACK	11
56-23-5	TETRACHLOROMETHANE	12
7782-50-5	CHLORINE	13
75-45-6	CHLORODIFLUOROMETHANE	13
N/A	COAL	18
75-71-8	DICHLORODIFLUOROMETHANE	18
68476-34-6	DIESEL FUEL NO. 2	27
N/A	DIESEL FUEL	19
111-46-6	DIETHYLENE GLYCOL	21
63148-62-9	DIEMETHYL SILOXANE	22
7758-11-4	DIPOTASSIUM PHOSPHATE	22
64742-65-0	DIST (PET), SOLVENT-DEWAXED HEAVY PARAFFINIC	23
7705-08-0	FERRIC CHLORIDE	25
14017-39-1	FERROUS SULFAMATE	26
68553-00-4	FUEL OIL, NO. 6	26
N/A	HEAT TRANSFER OIL	27
7664-39-3	HYDROGEN FLUORIDE	28
13465-08-2	HYDROXYLAMINE NITRATE	29
8008-20-6	KEROSENE	29
N/A	LUBRICATING OIL	30

9513336.2053

8012-95-1	MINERAL OIL	30
N/A	MOTOR OIL	31
7697-37-2	NITRIC ACID	32
7727-37-9	NITROGEN	34
19044-88-3	3,5-DINITRO-N4-DIPROPYLSULFANILAMIDE	35
144-62-7	OXALIC ACID	35
7782-44-7	OXYGEN	36
7664-38-2	PHOSPHORIC ACID	36
1336-36-3	POLYCHLORINATED BIPHENYLS	38
65997-15-1	PORTLAND CEMENT	38
1310-58-3	POTASSIUM HYDROXIDE	39
74-98-6	PROPANE	40
7440-23-5	SODIUM	41
497-19-8	SODIUM CARBONATE	42
7647-14-5	SODIUM CHLORIDE	43
1310-73-2	SODIUM HYDROXIDE	44
7632-00-0	SODIUM NITRITE	45
7772-98-7	SODIUM THIOSULFATE	47
64741-96-4	SOLVENT-REFINED HEAVY NAPHTHENIC DISTILLATE (PET)	47
64741-88-4	SOLVENT-REFINED HEAVY PARAFFINIC DISTILLATE (PET)	48
7664-93-9	SULFURIC ACID	49
75-69-4	TRICHLOROFLUOROMETHANE	51
8006-61-9	UNLEADED GASOLINE	52

Section IV:

Tier Two Forms

	Washington Community	/ Right-To-Know	#:	WA78	39000896	7		Page <u>l</u>	of <u>52</u>	_ page
	Facility Identification			Owner/Opera	or Name					
TIER TWO	Name U.S. Department of Energy - Hanford Site Street 825 Jadwin Avenue					Department of Energ Box 550, Richland W	-	Phone <u>(509</u>) 376-74	1 11
AND HAZARDOUS CHEMICAL INVENTORY	City Richland County SIC Code 9 9 9 9 Dun & Brad Number	Benton state <u>WA</u>		Emergency Contact Team Lea				and Medical		
Specific Information by Chemical	For Official Use Only Date Received			Name)		Title _	()		
Important: R	ead all instructions before completing form	Reporting Period: From	January 1 to Decemi	ber 31, 19 <u>94</u>		Check if information belo	w is identical to t	he information	submitted last	year.
Ē	Chemical Description	Physical and Health Hazards (Check all that apply)	Invento	ory.	TPT yre pem esp	(Non-Co	and Locations infidential) Locations			0 4 4
Check all	57 55 6 Trade , 2-PROPANEDIOL X X	X Fire X Sudden Release of Pressure Reactivity X Immediate (acute) X Delayed (chronic)	0 4 Max. Dail Amount (Avg. Dail Amount (3 6 5 No. o	y code	D 1 4 D 1 4 D 1 4 D 1 4 D 1 4 N 1 4	107K 100K AREA 15027 200E AREA 2703E 200E AREA 271B 200E AREA 2721EA 200E AREA 2721EA 200E AREA	\ \ \			
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Check all	57556 Trade Secret	X Fire X Sudden Release of Pressure Reactivity Immediate (acute) X Delayed (chronic)	Max, Dail Amount (D 1 4 C 2 4 D 1 4 C 2 4 C 2 4 D 1 4	2734ZG 200W AREA 308 300 AREA 331C 300 AREA 337 300 AREA 3765 300 AREA 607 600 AREA				
Certification (Re I certify under prinquiry of those James E. Rasm Office of Env	enal and sign after completing all sections) enalty of law that I have personally examined ar individuals responsible for obtaining the informa ussen, Acting Program Manager ironmental Assurance, Permits, and Policy al title of owner/operator OR owner/operator's a	ition, I believe that the sub	rmation submitted in mitted information is	true, accurate	ough 52, and complete				d a site plan d a list of site	asures

Washington Comm	unity Right-To-Know	#:	WA789000	8967		Page 2	of 52 pages
Facility Identification			wner/Operator Nam			하시는 사용을 만들다	
TIER TWO Name U.S. Department Street 825 Jadwin Avenu					ent of Energy Richland WA) 376~7411
HAZARDOUS City Richland	County <u>Benton</u> State <u>W</u>	-6186	Name <u>John B</u>	Ha]]	Team Leader, Title and Medical r. Phone (509) 37		
Specific Official Use Only Date Received		C	Name		Title		
Important: Read all instructions before completing for	Perm Reporting Period: From	January 1 to December	31, 19 <u>94</u>	☐ Ched	ck if information below is ide	entical to the information	submitted last year.
Chemical Description	Physical and Health Hazards (Check all that apply)	Inventory	Y P	T m p	Storage Codes and Li (Non-Confidenti Storage Locatio	al)	0 P
Chem. Name ACETYLENE Check all X	X Fire Sudden Release of Pressure Reactivity Immediate (acute) Delayed (chronic)	Max. Daily Amount (cod Avg. Daily Amount (cod No. of D On-Site		2 4 1706K 2 4 190KE 2 4 105N	100K AREA		
CAS 7 4 8 6 2 Trac Chem. Name ACETYLENE Check all X	X Fire X Sudden Release of Pressure Reactivity Immediate (acute) Delayed (chronic)	O 4 Max: Daily Arrount (con Arr	de) L 1	2 4 1705N 2 4 1168 2 4 1171 2 4 2247B 2 4 2249B 2 4 242AC	100N AREA 1100 AREA 1100 AREA 200E AREA 200E AREA 200E AREA		
CAS 7 4 8 6 2 Secretary Chem. Name ACETYLENE Check all X D X X X Action Check all that apply: Pure Mix Solid Liquid Gas EHS Name	Fire X Sudden Release of Pressure Reactivity Immediate (acute) Delayed (chronic)	Max. Daily Amount (co. Avg. Daily Amount (co. No. of D On-Site	de L :	2 4 272AW	200E AREA 200E AREA		
Certification (Read and sign after completing all sections) I certify under penalty of law that I have personally examinquiry of those individuals responsible for obtaining the James E. Rasmussen, Acting Program Manager Office of Environmental Assurance, Permits, and Pol Name and official title of owner/operator OR owner/operator.	mined and am familiar with the info information, I believe that the sub	ormation submitted in pa omitted information is tru Signature	iges one through ue, accurate, and co		that based on my 02/22/95 Date signed		f a site plan f a list of site

Washington Communi	ty Right-To-Know	ı #:	WA78	89000896	7			Page	3	of <u>52</u>	page
Facility Identification			Owner/Opera	tor Name				A. Profes			
TIER TWO EMERGENCY Street 825 Jadwin Avenue	Energy - Hanford	d Site			•	t of Energ Richland W	-	Phone	(509)	376-7	<u>′411</u>
AND HAZARDOUS CHEMICAL INVENTORY City Richland Count Numl	# Benton State W/		Name John B. Hall Title				and Me	eader, P	Public Sa rograms T		
Specific Official Use Only Date Received			Name)			Title 24 Hr. Phone)		
Important: Read all instructions before completing form	Reporting Period: From	January 1 to Decemb	oer 31, 19 <u>94</u>		Check i	if information belov	v is identical to	the info	rmation su	bmitted las	st year.
Chemical Description	Physical and Health Hazards (Check all that apply)	invento	ry	TPT PER		Storage Codes (Non-Cor Storage I	fidential)				O P t
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Wa	ishington Communit	y Right-lo-Know	#:	WA/8	90008967			Page <u>4</u>	of <u>52</u> page
Facility Ident	ification			Owner/Operat	or Name				
Street 82	S. Department of 5 Jadwin Avenue			Mail Address	<u>P.O.</u> B	epartment of Eno ox 550, Richland	d WA 99352) 376-7411
HAZARDOUS City R1		Benton State William State Wil	_		n B. Ha	Team Leader, Public Safety and Medical Programs Team			
Specific For Official Use Use Only	ID #			Phone (50) Name)	1677	24 Hr. Phone Title 24 Hr. Phone	7	3-3800
Important: Read all instruct	ions before completing form	Reporting Period: From	January 1 to Decemi	per 31, 19 <u>94</u>		Check if information	below is identical to	o the information	submitted last year.
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Washington Communi	WA7890008967					of <u>52</u> page			
Facility Identification			Owner/Operator Na	me			a gai file is si		
TIER TWO Name U.S. Department of street 825 Jadwin Avenue	<u>Energy – Hanfor</u>	d Site	4		Department of Ene Box 550, Richland			9) 376-7411	
HAZARDOUS CHEMICAL INVENTORY City Richland Count SIC Code 9 9 9 9 9 Dun & B Num	SIC Code 9 9 9 9 Dun & Brad Number 0 3 - 4 4 5 - 6 1 8 For Official Use Only Date Received				.11 -1677	Tit	Team Leader, Public Safety and Medical Programs Team (509) 373-3800		
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HAZARDOUS CHEMICAL INVENTORY		Benton state W/		Name JO	hn B.			Title	and Medical	, Public Sai Programs Te	
Specific Information by Chemical	For Official Use Only Date Received	Date Received						24 Hr. Phone Title 24 Hr. Phone	, ,		
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Washington Community Right-To-Know #:			WA7890008967 Page 8						_ page	
	Facility Identification			Owner/Opera	ator Name					
TIER TWO EMERGENCY AND	Street 825 Jadwin Avenue			Mail Addres	⊪ <u>P.O. E</u>	Department of Energ Box 550, Richland		Phone <u>(509</u>) 376-74	411
HAZARDOUS CHEMICAL INVENTORY	<u> </u>	Benton State WA		Name 00	ohn B. Ha	all -1677	_ Title .	Team Leader, and Medical (509) 37	Programs Te	
Specific Information by Chemical	For ID # Official Use Only: Date Received			Name)		Title 24 Hr. Phone	()		
r - r	Read all instructions before completing form	Reporting Period: From	January 1 to Decemb	ber 31, 19 <u>94</u>	1	Check if information bek	ow is identical to	the information	submitted last	ι γear.
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Washington Community Right-To-Know #:			#:	WA7890008967 Page 9						of <u>52</u>	_ page:
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TIER TWO EMERGENCY AND	Name <u>U.S. Department of E</u> street <u>825 Jadwin Avenue</u>			Mail Address	<u>P.O. B</u>		t of Energy Richland WA		Phone <u>(509</u>) 376-7	411_
HAZARDOUS CHEMICAL INVENTORY			\ zip <u>99352</u> _ 6 1 8 6		nn B. Ha			Title	Team Leader, Public Safety and Medical Programs Team (509) 373-3800		
Specific Information by Chemical	For ID # Official Use Only Date Received			Name)			Title			
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· Washington Communit	π.	WA7890008967					Page <u>10</u>	of <u>52</u>	_ page	
Facility Identification			Owner/Operat	or Name					a pilota	4,141
TIER TWO EMERGENCY AND Name U.S. Department of Street 825 Jadwin Avenue						t of Energ Richland W		Phone <u>(509</u>	376-7	411_
HAZARDOUS City <u>Richland</u> County	Benton State W/				1]] -1677			Team Leader, and Medical (509) 37	Programs Te	
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I certify under penalty of law that I have personally examined and am familiar with the information submitted inquiry of those individuals responsible for obtaining the information, I believe that the submitted information James E. Rasmussen, Acting Program Manager Office of Environmental Assurance, Permits, and Policy Name and official title of owner/operator OR owner/operator's authorized representative Signature				ugh <u>52</u> and complete		t based on my 02/22/95 Date signed	\[\begin{aligned}	I have attached I have attached coordinate abb I have attached dikes and othe	i a list of site reviations i a description	

Washington Community	#:	WA7890008967					of <u>52</u> pag	
TIER TWO EMERGENCY AND HAZARDOUS Facility Identification U.S. Department of E 825 Jadwin Avenue City Richland County	Site	Owner/Opera Name Mail Address Emergency Co	tor Name U.S. [P.O. E ontact hn B. Ha	Department of Energ Box 550, Richland W	VA 99352	Phone (509 Team Leader, and Medical)) 376-7411 , Public Safety Programs Team	
Specific Official Use Only Date Received Important: Read all instructions before completing form	Reporting Period: From J	January 1 to Decemb	Name		Check if information belo	Title 24 Hr. Phone		
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Washington Communi	ı #:	WA789000896	Page 12 of 52 pag		
TIER TWO EMERGENCY AND HAZARDOUS Facility Identification U.S. Department of 825 Jadwin Avenue City Richland Count	Energy – Hanfor	d Site M A Zip 99352 Em	WA789000896 Wher/Operator Name Name U.S. Itali Address P.O. Dergency Contact Name John B. Hallene (509) 372-		
Specific Official Use Date Received Important: Read all instructions before completing form	Reporting Period: From	N	lame ()	24 Hr. Ph	Title
Chemical Description	Physical and Health Hazards (Check all that apply)	Inventory	TPT Yre pem	Storage Codes and Locat (Non-Confidential) Storage Locations	
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	Washington Community Right-To-Know #:				390008967	Page <u>13</u> of	<u>52</u> pages	
TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY Specific Information by Chemical	Street 825 Jadwin Avenue City Richland County Benton State WA Zip 99352 SIC Code 9 9 9 9 Dun & Brad Number 0 3 - 4 4 5 - 6 1 8 6 For Official Use Only Date Received Read all instructions before completing form Reporting Period: From January 1 to Dece Physical and Health Hazards				P.O. Bontact hn B. Ha	-1677 24 Hr. I	Team Leader, Pub Title and Medical Prog Phone (509) 373-3	olic Safety grams Team 3800
Important: Re		Physical and Health	Invento		ТРТ Угв рвт	Storage Codes and Loc- (Non-Confidential) Storage Locations	ations	O p
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washington communi	<i>ι #</i> :	WA/89000896/ Page _						of <u>_52</u>	_ page	
Facility Identification		Owner/Opera	tor Name							
TIER TWO Name U.S. Department of Street 825 Jadwin Avenue			Mail Addres	• <u>P.O. E</u>		t of Energ Richland W) 376-74	411_
HAZARDOUS City Richland County	Benton State W. ad 0 3 - 4 4 5			hn B. Ha				Team Leader, and Medical	Programs Te	
Specific ID # Official Use Use Only Date Received			Phone (509) 372-1677 24 Hr. Phone (509) 373 Name							
Important: Read all instructions before completing form	Reporting Period: From	January 1 to Decemb	ber 31, 19 <u>94</u>		Check	if information belov	v is identical to	the information	submitted last	t year.
Chemical Description	Physical and Health Hazards (Check all that apply)	Invento	M	TPT yre pem esp		Storage Codes (Non-Con Storage L	fidential)			O P t
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Washington Community Right-To-Know #:			WA7890008967					of <u>52</u> pag	
TIER TWO EMERGENCY AND HAZARDOUIS Facility Identification U.S. Department of 825 Jadwin Avenue City Richland Count			• <u>U.S. [</u> • <u>P.O. [</u>	Department of Ener Box 550. Richland			376-7411		
HAZARDO03	ad 0 3 - 4 4 5		Name <u>Jo</u>	hn B. Ha	.11 -1677	Title	Team Leader, Public Safety and Medical Programs Team (509) 373-3800		
Specific Official Use Use Only Date Received			Name)		Title 24 Hr. Phone)			
Important: Read all instructions before completing form	Reporting Period: From	January 1 to Decemb	er 31, 19 <u>94</u>		Check if information be	low is identical to	the information	submitted last year	
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Washington Community Right-To-Know #:				39000896	Page <u>16</u>	of _ <u>52</u> pa	age		
Street 825 Jadwin Avenue Richland Count Richland Count SIC Code 9 9 9 9 9 Dun & B Num Specific Information by Chemical Street 825 Jadwin Avenue Richland Count For Official Use Only Date Received	Name U.S. Department of Energy - Hanford Site Street 825 Jadwin Avenue City Richland County Benton State WA Zip 99352 NICAL NTORY For Official Use Only Date Received Chemical Description Name U.S. Department of Energy - Hanford Site May Size WA Zip 99352 Dun & Brad O 3 - 4 4 5 - 6 1 8 6 Physical and Health Hazards Inve				Department of Eng Box 550, Richland	Title 24 Hr. Phone 24 Hr. Phone	Phone (509) Team Leader, and Medical (509) 37) 376-741] Public Safety Programs Team	
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	Washington Community	y Right-To-Know	#:	WA78	390008967	7	Page <u>17</u>	of <u>52</u> pages			
TIER TWO	Name U.S. Department of Energy - Hanford Site Street 825 Jadwin Avenue City Richland County Benton State WA Zip 99352 SIC Code 9 9 9 9 Dun & Brad Number 0 3 - 4 4 5 - 6 1 8 6				U.S. D	Phone (509) 376-7411				
AND HAZARDOUS CHEMICAL INVENTORY					Emergency Contact						
Specific Information by Chemical					Name Title Phone () 24 Hr. Phone ()						
Important: Re	ead all instructions before completing form	Reporting Period: From	om January 1 to December 31, 19 <u>94</u>			Check if information below is identical to the information submitted last year.					
	Chemical Description	Physical and Health Hazards (Check all that apply)	Invento	'n	TPT yre pem esp	Storage Codes and Location (Non-Confidential) Storage Locations	ons	Ö P 1			
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I certify under pe inquiry of those in James E. Rasmuss Office of Enviro	ad and sign after completing all sections; Inalty of law that I have personally examined an individuals responsible for obtaining the information. Acting Program Manager symmental Assurance, Permits, and Policy of title of owner/operator's and symmers.	tion, I believe that the sub-	rmation submitted in mitted information is Signature	pages one thro true, accurate,	ough 52 and complete	, and that based on my	I have attached coordinate abbre	a list of site eviations			
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Washington Community Right-To-Know #:					WA78	39000896	Page <u>18</u>	_ of <u>52</u>	page				
TIER TWO EMERGENCY AND	Name U.S. Department of Energy - Hanford Site Street 825 Jadwin Avenue City Richland County Benton State WA Zip 99352				Owner/Operator Name Name U.S. Department of Energy Mail Address P.O. Box 550, Richland WA 99352 Emergency Contact								
HAZARDOUS CHEMICAL INVENTORY	SIC Code 9 9 9 9 Dun & Brad 0 3 - 4 4 5 - 6 1 8 6					Name John B. Hall Title					Team Leader, Public Safety and Medical Programs Team (509) 373-3800		
Specific Information by Chemical	For Official Use Only	Date Received)							
Important: Rea	ed all instructions b	efore completing form	Reporting Period: From Physical and Health Hazards (Check all that apply)	January 1 to Decemb		TPT Yfem pem		if information below Storage Codes a (Non-Confi Storage Lo	nd Locations dential)	the information	submitted last	O P t	
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t certify under penal inquiry of those ind James E. Rasmusser Office of Environ	alty of law that i ha dividuals responsiblen. Acting Program mental Assurance.	e for obtaining the informa	d am familiar with the infortion, I believe that the subruthorized representative	mation submitted in nitted information is Signature	pages one thro true, accurate,	ugh <u>52</u> and complete		at based on my 02/22/95 Date signed	Option	hal Attachments I have attached t have attached coordinate abbi I have attached dikes and other	a site plan a list of site reviations a description of		

	Washington Community	/ Right-To-Know	#:	WA78	39000896	7			Page	of _52	page
	Facility Identification					Owner/Operator Name					
TIER TWO	Name <u>U.S. Department of Energy - Hanford Site</u> Street <u>825 Jadwin Avenue</u>				u.s. [,	Phone (509	376-74	111		
EMERGENCY					Name U.S. Department of Energy Phor Mail Address P.O. Box 550, Richland WA 99352						
AND		Benton state WA	Zip 99352	Emergency Contact							
HAZARDOUS CHEMICAL										Public Saf	ety
INVENTORY	SIC Code 9 9 9 9 Number	03 - 445	_[6]1 8 6]	Name John B. Hall					Title and Medical Programs Team		
		araka dari ilabah di sa s	e, leik ei Terbreit für (Phone <u>(5</u> (<u>) 372-</u>	24 Hr. Phone	<u>(509) 373</u>	<u>~3800</u>			
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Important: Re	and all instructions before completing form	Reporting Period: From	ber 31, 19 <u>94</u>	<u></u>	Check if information below is identical			to the information submitted last year,			
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EHS Name			3 6 5 on-s	ite (days)	A 1 4	<u>1174</u>	1100 AREA			<u>-</u>	<u> </u>
Certification (Re-	ad and sign after completing all sections;							Option	nal Attachments		
I certify under pe	nalty of law that I have personally examined a ndividuals responsible for obtaining the informa	nd am familiar with the info	rmation submitted in	pages one thr	ough <u>52</u>	, and th	nat based on my	X	I have attached	a site plan	
James F. Rasmuss	sen Acting Program Manager	1 5011015 11121 1116 900		,	up.u.		02/22/95		I have attached coordinate abbre		
Office of Enviro	ommental Assurance, Permits, and Policy	uthorized representative	Signature				Date signed	∐	I have attached		

Washington Community Right-To-Know #:			WA7890008967					of <u>52</u>	Dage
Facility Identification			Owner/Opera	tor Name					
TIER TWO EMERGENCY AND Name U.S. Department of Street 825 Jadwin Avenue			Mail Address	<u>P.O. E</u>	Department of Energ Box 550, Richland W	y A 99352	Phone <u>(509</u>) 37 <u>6-7</u>	411
HAZARDOUS CHEMICAL INVENTORY City Richland County Sic Code 9 9 9 9 0 Dun & Bra	w <u>Benton</u> State <u>W/</u> ad 0 3 - 4 4 5			hn B. Ha]] 1677		Team Leader,	Programs Te	
Specific Information by Chemical For Official Use Only Date Received			Name					3-3800	
Important: Read all instructions before completing form	Reporting Period: From	January 1 to Decemb	oer 31, 19 <u>94</u>		Check if information below	v is identical to	the information	submitted las	t year.
Chemical Description	Physical and Health Hazards (Check all that apply)	Invento	'y	TPT Yre pem esp	Storage Codes (Non-Con Storage L	fidential)			O p t
Check all Trade Secret Check all That apply: Pure Mix Solid Liquid Gas EHS EHS Name	X Fire Sudden Release of Pressure Reactivity X Immediate (acute) X Delayed (chronic)	0 6 Max. Daily Amount to Amount to Amount to Amount to Amount to 3 6 5 On-Sit	code)	A 1 4 B 1 4 B 1 4 B 1 4 B 1 4 B 1 4	202A 200E AREA 202A 200E AREA 204AR 200E AREA 225BC 200E AREA 242A 200E AREA 244AR 200E AREA				
CAS Trade Secret Chem. Name DIESEL FUEL Check all That apply: Pure Mix Solid Liquid Gas EHS EHS Name	Fire Sudden Release of Pressure Reactivity Immediate (acute) X Delayed (chronic)	0 6 Max: Daily Amount (c	code)	B 1 4 A 1 4 A 1 4 A 1 4 A 1 4 B 1 4	2713E 200E AREA 2721EA 200E AREA 282B 200E AREA 282BA 200E AREA 2402W 200W AREA 2713W 200W AREA				
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Certification (Read and sign after completing all sections) I certify under penalty of law that I have personally examined a inquiry of those individuals responsible for obtaining the inform James E. Rasmussen, Acting Program Manager Office of Environmental Assurance, Permits, and Policy Name and official title of owner/operator OR owner/operator's	ation, I believe that the subr	rmation submitted in nitted information is t Signature	pages one thro true, accurate,	ugh <u>52</u> and complete.	, and that based on my	X	al Attachments I have attached I have attached coordinate abbr I have attached dikes and other	a list of site eviations a description	

Washington Communit	#:	WA7890008967 Page 21 of						
HAZARDOUS	Site Zip 99352 E	Mail Address P, Emergency Contact Name John B Phone (509) Name Phone ()) 376–74 Public Saf Programs Te 3–3800	ety				
Chemical Description	Physical and Health Hazards (Check all that apply)	Inventory	y P	P T	Storage Codes and Location (Non-Confidential) Storage Locations			O P t
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Washington Community	#:	WA7890008967			Page <u>22</u>	of <u>52</u> pages			
Facility Identification ER TWO ERGENCY D ZARDOUS EMICAL /ENTORY For Official Use Only Date Received Facility Identification Name U.S. Department of Energy - Hanford Site Street 825 Jadwin Avenue City Richland County Benton State WA Zip 99352 Dun & Brad Number 0 3 - 4 4 5 - 6 1 8 6 For Official Use Only Date Received Physical			Mail Address P. (Emergency Contact Name John B. Phone (509) Name Phone ()	6. Departme 0. Box 550. Hall 372-1677	Richland WA 99	Team Leader, Public Safet Title and Medical Programs Team Phone (509) 373-3800 Title Phone ()			
Important: Read all instructions before completing form		January 1 to Decemb				gelle er i e un gênningste keine ne	submitted last year.		
Chemical Description	Physical and Health Hazards (Check all that apply)	Invento	p e	T 6 M	Storage Codes and Loca (Non-Confidential) Storage Locations	e Marilla — Elektristist Grafi — a malag ike ji s	O P t		
Chem. Name DIMETHYL SILOXANE Check all X	Fire Sudden Release of Pressure Reactivity Immediate (acute) X Delayed (chronic)	Max. Dail Amount ((R 1 R 1 R 1	4 <u>200W A</u> 4 <u>300 AR</u>	REA TRANSFORMERS REA TRANSFORMERS EA TRANSFORMERS EA TRANSFORMERS				
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Certification: (Read and sign after completing all sections) I certify under penalty of law that I have personally examined an inquiry of those individuals responsible for obtaining the informal James E. Rasmussen. Acting Program Manager Office of Environmental Assurance. Permits, and Policy Name and official title of owner/operator OR owner/operator's a	tion, I believe that the sub-	rmation submitted in mitted information is Signature		52 , and t	hat based on my 02/22/95 Date signed		l a site plan l a list of site		

Washington Community Right-To-Know #:			#:	WA7890008967					Page <u>23</u> of <u>52</u> page			
TIER TWO EMERGENCY	Facility Identification Name U.S. Department of E street 825 Jadwin Avenue			Mail Address	U.S. [P.O. [t of Energy Richland WA		Phone <u>(509</u>) 376-7	7411	
HAZARDOUS CHEMICAL INVENTORY		<u>Benton</u> state <u>WA</u> 0 3 - 4 4 5			hn B. Ha				Team Leader, and Medical (509) 37	Programs T		
Specific Information by Chemical	Information Only Date Received							Title 24 Hr. Phone	()			
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Washington Community Right-To-Know #:				WA7890008967 Page <u>24</u> o						_ page
Facility Identification IER TWO MERGENCY ND AZARDOUS HEMICAL VENTORY Pecific formation r Chemical IER TWO Name U.S. Department of Energy - Hanford Site Street 825 Jadwin Avenue City Richland County Benton State WA Zip 99352 Dun & Brad Number 0 3 - 4 4 5 - 6 1 8 6 Por Official Use Only Date Received Important: Read all instructions before completing form Reporting Period: From January 1 to Decement of Energy - Hanford Site Number 0 3 - 4 4 5 - 6 1 8 6 Reporting Period: From January 1 to Decement of Energy - Hanford Site Note 1				Team Leader and Medical Phone (509) 372-1677 24 Hr. Phone (509) 3 Name Phone () 24 Hr. Phone ()						
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Washington Communit	y Right-To-Know #:	WA7890008967	Page <u>25</u> of <u>52</u> pages		
TIER TWO Name U.S. Department of E	Energy - Hanford Site		rtment of Energy	Phone (509) 376-7411	
AND HAZARDOUS CHEMICAL INVENTORY Street 825 Jadwin Avenue Richland County SIC Code 9 9 9 9 Dun & Branch Number	Benton State WA Zip 99352	Emergency Contact		Team Leader, Public Safety and Medical Programs Team (509) 373-3800	
Specific Information by Chemical For ID # Official Use Only Date Received		Name	Title 24 Hr. Phone	()	
Important: Read all instructions before completing form	Reporting Period: From January 1 to Decer	nber 31, 19 <u>94</u>	Check if information below is identical to	the information submitted last year,	
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	Washington Community Right-10-Know #:				WA/89000896/ Page 2					_ of <u>52</u>	_ page
	Facility Identification			Owner/Operat	or Nam	10					
TIER TWO EMERGENCY	Name <u>U.S. Department of E</u> Street <u>825 Jadwin Avenue</u>	nergy – Hanford	i Site	•			Department of Enemons 550, Richland		Phone (509) 376-74	411
AND HAZARDOUS	city <u>Richland</u> County	Benton State W/	1 Zip <u>99352</u>	Emergency Co	ontact	Tet J				frak fi	
CHEMICAL INVENTORY	SIC Code 9 9 9 9 Dun & Brat Numbe	03-445	- 6 1 8 6	Name <u>J0</u>]]	Title	Team Leader, Public Safe Title and Medical Programs Tea		
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Street 825 Jadwin Avenue					ox 550, Richland WA			
HAZARDOUS City Richland County	Benton State W/ er 0 3 - 4 4 5			hn B. Ha		Team Leader, Publ Title and Medical Progr	rams Team	
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Washington Communit	#:	WA7890008967					of <u>52</u>	_ page	
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TIER TWO	Name <u>U.S. Department of E</u> Street <u>825 Jadwin Avenue</u>	<u>nergy – Hanfor</u>	d Site			Department of Energ Box 550, Richland W		Phone (509) 376-74	411
AND HAZARDOUS CHEMICAL INVENTORY	City <u>Richland</u> County	Benton State W		Emergency Co				Team Leader, and Medical		
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Office of Environ	en. Acting Program Manager mental Assurance, Permits, and Policy title of owner/operator OR owner/operator's a	uthorized representative	Signature			02/22/95 Date signed	—— I 📖	I have attached coordinate abbr I have attached dikes and other	eviations a description o	

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CHEMICAL SIC Code 9 9 9 9 Dun & Bra	<u>Benton</u> state <u>W/</u>			hn B. Ha]] 1677			Public Safet Programs Team 3-3800	
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	Washington Community Right-To-Know #:			WA7	B9000896		Page 31 of 52			
Fa	cility Identification			Owner/Opera	tor Name					
EMERGENCY AND	U.S. Department of E			Mail Addres	<u> P.O.</u>	Department of Energ Box 550, Richland		Phone (509) 376-7	411
HAZANDOUS	ty Richland County SIC Code 9999 Dun & Brai	benton state <u>W/</u>			hn B. Ha	all -1677		Team Leader, and Medical (509) 37	Programs Te	
Specific Information by Chemical	For Official Use Only Date Received			Name)		Title 24 Hr. Phone	()		
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	Washington Communit	#:	WA7890008967					Page 32	of <u>52</u>	Dage	
TIER TWO	Facility Identification Name U.S. Department of	Fnergy - Hanfor	l Site	Owner/Opera		lenartmo	nt of Enough				
EMERGENCY	Street 825 Jadwin Avenue	Lifer gy - Ham Lore	<u> J Site</u>				nt of Energy Richland WA		Phone <u>(509</u>) 3/6-/	411
AND HAZARDOUS	•	Benton State W/	A Zip 99352	Mail Address P.O. Box 550, Richland WA 99352 Emergency Contact						n Baster and Harman Hall In	radiolitic rode.
CHEMICAL INVENTORY		dr 0 3 – 4 4 5			<u>hn B. Ha</u>				Team Leader,	Programs Te	
	For ID#	 Vince the Other Seed For Security and Addition 		Phone (509) 372-1677 24 Hr. Phone (509) 373-3800							
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ā	Chemical Description	Physical and Health Hazards (Check all that apply)	Invento		T P T Y r e p e m e e p		Storage Codes a (Non-Confi	nd Locations dential)	, the undimacor	Suprinced 1921	OPt
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IER TWO MERGENCY ND Facility identification				• <u>U.S. [</u>	Department of Energ Box 550, Richland W				telosii Si v
AZARDOUS City <u>Richland</u> Count	A zip <u>99352</u> - 6 1 8 6		ontact hn B. Ha 19) 372-	Team Leader, Public Safety and Medical Programs Team (509) 373-3800					
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Washington Community Right-To-Know #:			WA78	Page <u>34</u>	of 52	_ page			
Facility Identification TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY Specific Information by Chemical Important: Read all instructions before completing form Facility Identification Name U.S. Department of Energy - Hanford Site Street 825 Jadwin Avenue County Benton State WA Zip 99352 Dun & Brad O 3 - 4 4 5 - 6 1 8 6 Number O 3 - 4 4 5 - 6 1 8 6 Por Official Use Only Date Received Reporting Period: From January 1 to Dece			Phone (509) 372-1677 24 Hr. Phone (509) 373-38 Name						411 fety eam
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Washington Com	nmunity Right-To-Know	#:	WA789000896	7	Page <u>35</u> of <u>52</u> page	66		
Facility Identification Name U.S. Departmen Street 825 Jadwin Ave City Richland	t of Energy - Hanford nue _ county <u>Benton</u> State <u>W/</u> Dun & Brad 0 3 - 4 4 5	d Site M A zip 99352 Em - 6 1 8 6 N	Team Leader, and Medical Phone (509) 372-1677 24 Hr. Phone (509) 373					
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Washington Comm	unity Right-To-Know	#:	WA789000896	7	Page <u>36</u> of <u>52</u> page
R TWO RGENCY ARDOUS MICAL NTORY For Official Use Matter County Description For Official Use Matter County D			Name U.S. D. Mail Address P.O. E Emergency Contact Name John B. Ha	Department of Energy Box 550, Richland WA 9935 11 Tr 1677 24 Hr. Pho	Phone (509) 376-7411 Team Leader, Public Safety and Medical Programs Team (509) 373-3800
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	Washington Community Right-To-Know #:			WA78	39000896	Page <u>37</u> of <u>5</u>	2 page			
	Facility Identification			Owner/Opera	tor Name					
TIER TWO EMERGENCY AND	Name <u>U.S. Department of E</u> Street <u>825 Jadwin Avenue</u>					Department of Energy Box 550, Richland WA 99		5-7411		
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	Washington Community	Right-To-Know	#:	WA78	390008967	<u>'</u>	Page <u>38</u>	of <u>52</u>	pages	
TIER TWO	Street 825 Jadwin Avenue City Richland County Benton State WA Zip 99352 SIC Code 9 9 9 9 Dun & Brad 0 3 - 4 4 5 - 6 1 8 6 For Official Use Only Date Received			Owner/Operator Name Name U.S. Department of Energy Phone (509) Mail Address P.O. Box 550, Richland WA 99352 Emergency Contact Team Leader, Put and Medical Prophone (509) 372-1677 Phone (509) 372-1677 24 Hr. Phone (509) 373-3 Name Title Phone () 24 Hr. Phone ()						
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Washington Community	#:	WA7890008967					of <u>52</u>	pag	
Facility Identification			Owner/Opera	tor Name					
TIER TWO Name U.S. Department of E	<u>nergy – Hanford</u>	d Site	Nam	<u> U.S. C</u>	epartment of Energy	/	Phone (50	9) 376–7	7411
AND Street 825 Jadwin Avenue		·····	Mail Addres	P.O. E	Nox 550, Richland WA	99352			
HAZARDOUS City Richland County	Benton State W/	A Zip <u>99352</u>	Emergency C				Birdyn Si		
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James E. Rasmussen, Acting Program Manager Office of Environmental Assurance, Permits, and Policy					02/22/95		coordinate ab	breviations	
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Washington Communi	y Right-To-Know	<i>!</i> #:	WA78	39000896	7	Page <u>40</u>	of _52page
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Washington Communi	<i>i</i> #:	WA789	000896	Page <u>41</u> o	f <u>52</u> page		
Facility Identification			Owner/Operator	Name			
TIER TWO EMERGENCY AND Name U.S. Department of Street 825 Jadwin Avenue	<u>Energy - Hanfor</u>	d Site			Department of Energy Box 550, Richland WA 99		376-7411
HAZARDOUS City Kichland Coun	ry <u>Benton</u> state <u>W</u> rad 0 3 – 4 4 5			1 B. Ha		Team Leader, Pu Title and Medical Pro	grams Team
Specific Official Use Information by Chemical Only Date Received			Name)	24 Hr. P	Title	
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	Washington Community Right-To-Know #:			WA7890008967					of <u>52</u>	page	
TIER TWO	Facility Identification Name U.S. Department of E	neray - Hanford	Site	Owner/Operat	References	epartment of Energ	keliki ya IV	Phone (509	9) 376-7	411	
EMERGENCY	street 825 Jadwin Avenue	<u> nergy - namoru</u>	3166			lox 550, Richland V		1110110 _1002	<u>, , , , , , , , , , , , , , , , , , , </u>		
AND HAZARDOUS CHEMICAL INVENTORY	City Richland County	Benton state <u>WA</u> 0 3 - 4 4 5		Emergency Co	ontact hn B. Ha	Title	and Medical	, Public Saf Programs Te			
Specific Information by Chemical	For ID# Official Use Only Date Received		Phone (509) 372-1677 24 Hr. Phone (Name Phone () 24 Hr. Phone (7		
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Washington Communit	y Right-To-Know :	#: WA	7890008967	Page <u>43</u> of <u>52</u> page		
For ID#	Benton state <u>WA</u>	Site Name C	P.O. Box 550, Contact Ohn B. Hall 509) 372-1677	Phone (509) 376-7411 Team Leader, Public Safety and Medical Programs Team		
Chemical Description	Physical and Health Hazards (Check all that apply)	Inventory	T P T y r e p e m e e p	Storage Codes and Location (Non-Confidential) Storage Locations		
Chem. Name SODIUM CARBONATE Check all X X X X X That apply: Pure Mix Solid Liquid Gas EHS EHS Name	Sudden Release of Pressure Reactivity X Immediate (acute)	0 4 Max. Daily Amount (code) 0 4 Avg. Daily Amount (code) 3 6 5 No. of Days On-Site (days)	I 1 4 236Z I 1 4 2715UA F 1 4 2715UA F 1 4 271T I 1 4 303F D 1 4 305	200W AREA 200W AREA 200W AREA 200W AREA 300 AREA 300 AREA		
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Certification (Read and sign efter completing all sections) I certify under penalty of law that I have personally examined at inquiry of those individuals responsible for obtaining the informal James E. Rasmussen, Acting Program Manager Office of Environmental Assurance, Permits, and Policy Name and official title of owner/operator OR owner/operator's a	ition, I believe that the submit		hrough52, and that te, and complete.		I have attached a site plan I have attached a list of site coordinate abbreviations I have attached a description of dikes and other safeguard measures	

wasnington Commu	nity Right-10-Know	W #:	WA78	39000896	<u>/ </u>		Page <u>44</u>	of <u>52</u>	_ page
Facility Identification			Owner/Opera	tor Name					
TIER TWO Name U.S. Department	of Energy – Hanfor	rd Site	Name	. U.S. D	epartment of Energ	1V	Phone (500	<u>) 376-</u> 7	<i>1</i> 11
street 825 Jadwin Avenue					ox 550, Richland V		7110116 <u>(303</u>	7 370-7	311
HAZARDOUS City Richland Co	ounty Benton State W	IA zip 99352	Emergency Co			Turgajo se ajemi		ilia Matak	afrikasi ari
1	& Brad 0 3 - 4 4 5	61106			and the second services of the services of	TO SHIFT WELVERY	Team Leader	, Public Saf	fatu
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			Phone <u>(5(</u>	<u>)9) 372-</u>	1677	24 Hr. Phone	<u>(509) 37</u>	<u>'3-3800</u>	
For ID # Official									
Information by Chemical Use Only Date Received			Name	``	·	Title			—
		to, as weeks as a self go	Phone (, 		24 Hr. Phone	<u> </u>		
Important: Read all instructions before completing for	m Reporting Period: From	n January 1 to Decemb	oer 31, 19 <u>94</u>		Check if information belo	w is identical to t	he information	submitted last	t year.
Chemical Description	Physical and Health	Invento		T P T		s and Locations			0
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that apply: Pure Mix Solid Liquid Gas E	Delayed (chronic)	3 6 5 No. of	Days	B 1 4	284W 200W AREA				
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l certify under penalty of law that I have personally examin	and and am familiar with the infe	ormation substitud in .	radi devodencija	սցի 52			or a National Artists		
inquiry of those individuals responsible for obtaining the in	formation, I believe that the sub	omitted information is t	true, accurate,	and complete.	, and that based on my	I <u> </u> ^	have attached	•	
James E. Rasmussen, Acting Program Manager Office of Environmental Assurance, Permits, and Policy					02/22/95	- °	have attached coordinate abbr	reviations	
Name and official title of owner/operator OR owner/operat	or's authorized representative	Signature			Date signed			l a description of r safeguard mea	

Washington Communit	Washington Community Right-To-Know #:					Pag	,e <u>45</u>	of <u>52</u>	page
Facility Identification		Historia,	Owner/Opera	tor Name					i iya ist
TIER TWO EMERGENCY AND Name U.S. Department of Street 825 Jadwin Avenue					Department of Energ Nox 550, Richland W		ne <u>(509</u>) 376-7	411
City K1Ch I and County CHEMICAL INVENTORY City K1Ch I and County SIC Code 9 9 9 9 9 Dun & Br. Numb	Benton State Willer Willer			hn B. Ha	11 1677		Medical	Public Sam Programs To 3-3800	
Specific Official Use Use Only Date Received			Name)		Title)	and the second	
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Chemical Description	Physical and Health Hazards (Check all that apply)	Invento)ry	TPT yre pem esp	(Non-Cor	and Locations ifidential) Locations			O P t
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Certification (Read and sign after completing all sections)							ttachments		<u></u>
I certify under penalty of law that I have personally examined inquiry of those individuals responsible for obtaining the inform James E. Rasmussen, Acting Program Manager Office of Environmental Assurance, Permits, and Policy Name and official title of owner/operator OR owner/operator's	nation, I believe that the sub	ormation submitted in mitted information is Signature	pages one thro true, accurate,	ough <u>52</u> and complete	. and that based on my 02/22/95 Date signed	I ha	rdinate abbi ive attached	f a list of site	

Washington Commu	Washington Community Right-To-Know #:			WA7890008967				
Facility Identification			Owner/Operator Name			46 of <u>52</u> p		
TIER TWO Name U.S. Department of	of Energy - Hanfor	d Site	Name U.S.	Department of Energ	V Phone	(509) 376-7411	1	
street 825 Jadwin Avenue				Box 550, Richland W		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_	
AND HAZARDOUS City Richland Co	unty <u>Benton</u> State <u>W</u>	A Zip <u>99352</u>	Emergency Contact				<u> </u>	
l l	Brad 0 3 - 4 4 5	1_61186	The state of the s		Team L	eader, Public Safety	::: /	
INVENTORY SIC CODE []]]	JMD8F [0] 3 - [4] 4 3]-[0]1]0]0]		111		dical Programs Team		
For ID#	ge anglik a selembe kepal di Bibbili di Ko		Phone (509) 3/2-	-1677	24 Hr. Phone <u>(509</u>) 373-3800		
Specific Official			Name		Tal-			
Information by Chemical Only Date Received		1: 2:	Phone ()		Title)		
Important: Read all instructions before completing form	n Reporting Period: From	January 1 to Decembr			tical to the information submitted last year.			
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Certification (Read and sign after completing all sections)					Optional Attac	hments	_	
I certify under penalty of law that I have personally examin inquiry of those individuals responsible for obtaining the inf	ed and am familiar with the info	ormation submitted in p	pages one through 52	, and that based on my	X I have a	ittached a site plan		
James E. Rasmussen, Acting Program Manager	ormation, I believe that the sub	imitted information is tr	true, accurate, and complete			sttached a list of site		
Office of Environmental Assurance, Permits, and Policy Name and official title of owner/operator OR owner/operator		Signature		02/22/95 Date signed	I have a	ate abbreviations Ittached a description of		
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Washington Communit	y Right-To-Know	#:	WA78	39000896	7	Page <u>47</u> of <u>52</u> page				
Facility Identification			Owner/Opera	tor Name		A.斯·蒙·德特·斯克克·丁基尔会会 (文文):				
TIER TWO EMERGENCY AND Name U.S. Department of I 825 Jadwin Avenue			Mail Address	* <u>P.O. E</u>	Department of Energy Box 550, Richland WA 99:					
HAZARDOUS City Richland County	Benton State W/			hn B. Ha		Team Leader, Public Safety and Medical Programs Team				
Specific Information by Chemical For ID # Official Use Only Date Received			Name Title							
Important: Read all instructions before completing form	Reporting Period: From	January 1 to Decemb	per 31, 19 <u>94</u>		Check if information below is identi	w is identical to the information submitted last year.				
Chemical Description	Physical and Health Hazards ICheck all that apply!	Invento		esp pem TPT	Storage Codes and Loca Non-Confidentiall Storage Locations					
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Washing1	Washington Community Right-To-Know #:			WA7890008967					of <u>52</u>	_ page
Facility Identification				Owner/Opera	tor Name		·			
EMERGENCY Street 825 Jadw		nergy - Hanford	Site	N .		Department of E Box 550, Richla		Phone <u>(509</u>) 376-74	411
AND HAZARDOUS CHEMICAL INVENTORY City Richland SIC Code 9 9 9		Benton State WF			hn B. Ha	all -1677	Title	Team Leader, and Medical (509) 37	Programs Te	
Specific Official Use Information by Chemical Only Da				Name)	Title	/			
Important: Read all instructions before	Important: Read all instructions before completing form Reporting Period: From January 1 to Decemb					Check if information	on below is identical to	the information	submitted last	t year.
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wa	snington Communit	y Kight-lo-Know	#:	WA78	39000896	<u>/</u>	F	Page <u>49</u> of <u>52</u>	page
AND Street 82	S. Department of I 5 Jadwin Avenue		Mail Address	U.S. D	Department of Energ Nox 550. Richland W	· · · · · · · · · · · · · · · · · · ·	Phone (509) 376-7	7411	
HAZARDOUS CHEMICAL INVENTORY City Ric SIC Code		Benton State W/	A zip <u>99352</u> - 6 1 8 6		hn B. Ha 199) 372-		Title al	eam Leader, Public Sa nd Medical Programs T 509) 373-3800	
Specific Official Information by Chemical Only	ID # Date Received			Name Title					
Important: Read all instruction	ons before completing form	Reporting Period: From	January 1 to Decemb	ber 31, 19 <u>94</u>		Check if information belo	w is identical to th	ne information submitted la	st year,
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Certification <i>(Read and sign after</i>) I certify under penalty of law that inquiry of those individuals responsible. James E. Rasmussen, Acting Prooffice of Environmental Assuration Name and official title of owner/	it I have personally examined ar insible for obtaining the informa igram Manager ince, Permits, and Policy	tion, I believe that the sub-				, and that based on my 02/22/95 Date signed	Optional X II	Attachments have attached a site plan have attached a list of site pordinate abbreviations have attached a description kes and other safeguard me	n of

	washington Community Right-10-Know #:			WA/8	89000896	<u>/</u>		P	⁹ age <u>50</u>	of <u>52</u>	_ page
TIER TWO EMERGENCY	Name U.S. Department of E Street 825 Jadwin Avenue			• <u>U.S. [</u>	Department o Box 550. Ric		thone <u>(509</u>) 376-74			
HAZARDOUS CHEMICAL INVENTORY	i	Benton State W/			ontact hn B. Ha 09) 372-			Title ar		Public Safe Programs Te	
Specific Information by Chemical	For ID # Official Use Only Date Received			Name)	10,7		Title)	1-3600	
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l certify under per inquiry of those in James E. Rasmuss Office of Enviro	and and sign after completing all sections) naity of law that I have personally examined an individuals responsible for obtaining the information. Acting Program Manager ommental Assurance, Permits, and Policy I title of owner/operator's a	tion, I believe that the subr	rmation submitted in nitted information is Signature	pages one thro true, accurate,	ugh <u>52</u> and complete		ed on my 2/22/95 signed	X 11		a list of site	

Washington Commur	iity Right-Io-Know	N #:	WA7	89000896.	7		Page <u>51</u>	of <u>52</u>	_ page
Facility Identification			Owner/Opera	tor Name					
TIER TWO EMERGENCY AND Name U.S. Department o Street 825 Jadwin Avenue			Mail Addres	<u> P.O. B</u>	Department of Energ Box 550, Richland W		Phone <u>(509</u>) 376-74	411_ ——
HAZARDOUS City Richland Co.	unty <u>Benton</u> state <u>W</u> Brad 0 3 - 4 4 5		Marine OO	ontact Ohn B. Ha 09) 372-		Title	Team Leader, Public Safety and Medical Programs Team (509) 373-3800		
Specific Official Use Only Date Received			Name)	1077	Title _	()	3-3000	
Important: Read all instructions before completing form	Reporting Period: From	a January 1 to Decemb	ber 31, 19 <u>94</u>		Check if information belo	w is identical to	the information	submitted last	t year.
Chemical Description	Physical and Health Hazards (Check all that apply)	Invento	37 7	TPT Yre psm esp	(Non-Cor	s and Locations nfidential) Locations			O P t
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CAS 75694 Trade Secret Chem. Name TRICHLOROFLUOROMETHANE Check all X X Check all that apply: Pure Mix Solid Liquid Gas EFEHS Name				D 1 4	607 600 AREA				
Certification (Read and sign after completing all sections)						Option	al Attachments		
I certify under penalty of law that I have personally examine inquiry of those individuals responsible for obtaining the information of the second of the se	ormation, I believe that the sub	formation submitted in phintted in the state of the state	pages one thro	ough 52	, and that based on my 02/22/95 Date signed	X	I have attached I have attached coordinate abbi I have attached dikes and other	l a site plan l a list of site reviations l a description o	

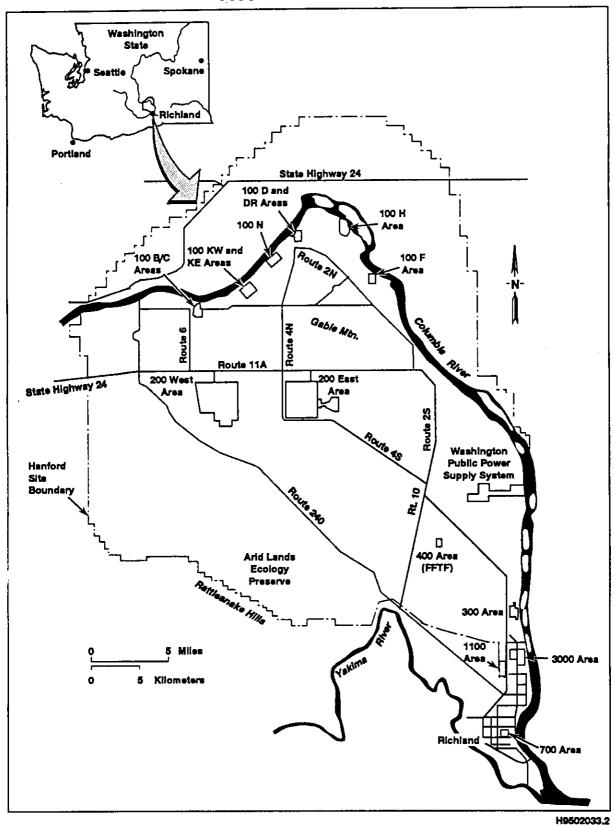
Washington Communit	y Right-To-Know	#:	WA78	390008967	7			Page <u>52</u>	of <u>52</u>	_ pages
Facility Identification Name U.S. Department of Energy - Hanford Site Street 825 Jadwin Avenue City Richland County Benton State WA Zip 99352 SIC Code 9 9 9 9 Dun & Brad Number 0 3 - 4 4 5 - 6 1 8 6 Pecific Information by Chemical Use Only Date Received Important: Read all instructions before completing form Reporting Period: From January 1 to December 1 to 1 t				Owner/Operator Name Name U.S. Department of Energy Phone (Mail Address P.O. Box 550, Richland WA 99352 Emergency Contact Team Lea and Median						
Important: Read all instructions before completing form Chemical Description	Reporting Period: From Physical and Health Hazards (Check all that apply)	January 1 to Decemb		T P T y r e p e m e s p	Check if i	Storage Codes an (Non-Confidence Local Storage Local	d Locations ential)	the information	submitted last	year. O p t
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CAS Trade Secret Chem. Name Check all	Fire Sudden Release of Pressure Reactivity Immediate (acute) Delayed (chronic)		code). V							
Certification: (Read and sign after completing all sections) I certify under penalty of law that I have personally examined a inquiry of those individuals responsible for obtaining the inform James E. Rasmussen. Acting Program Manager Office of Environmental Assurance. Permits, and Policy Name and official title of owner/operator OR owner/operator's	ation, I believe that the sub					based on my 02/22/95 Ite signed	X	al Attachments I have attached I have attached coordinate abbro I have attached dikes and other	a list of site eviations a description of	

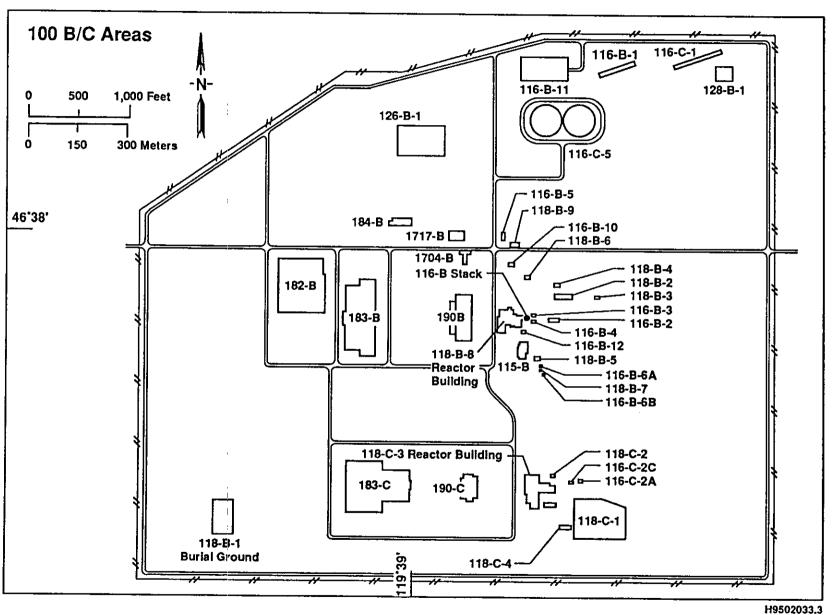
1994 Tier Two Emergency and Hazardous Chemical Inventory

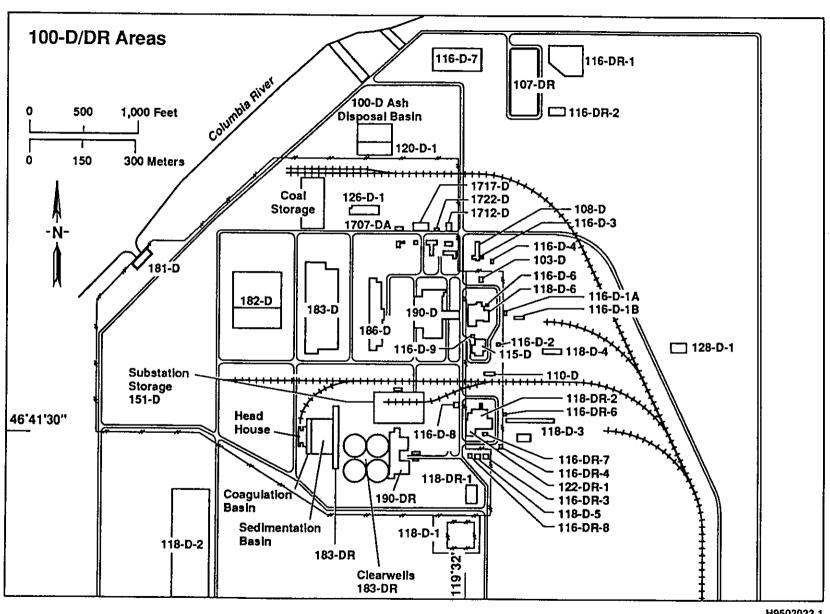
Section V:

Site Plans

The Hanford Site

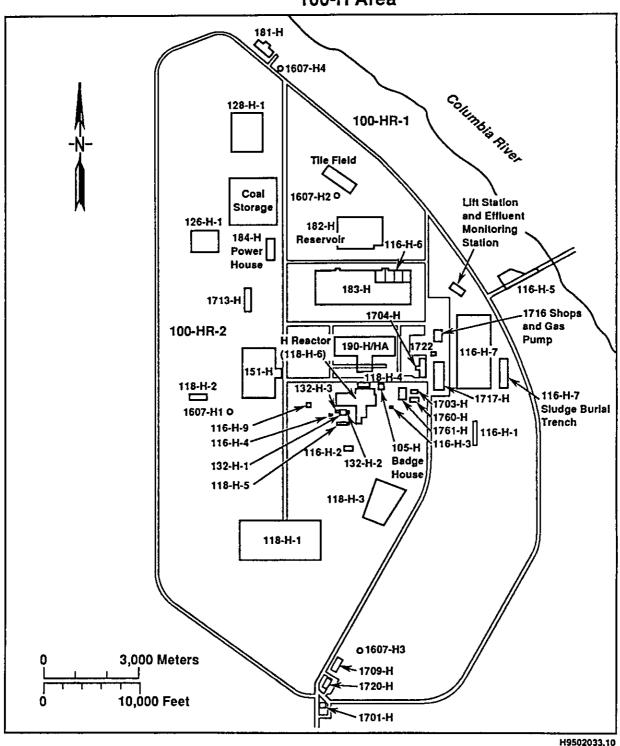


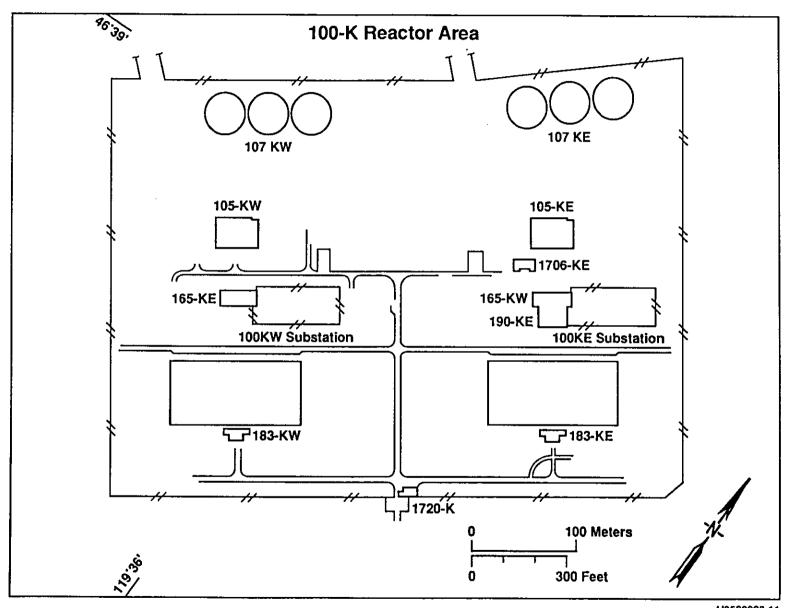




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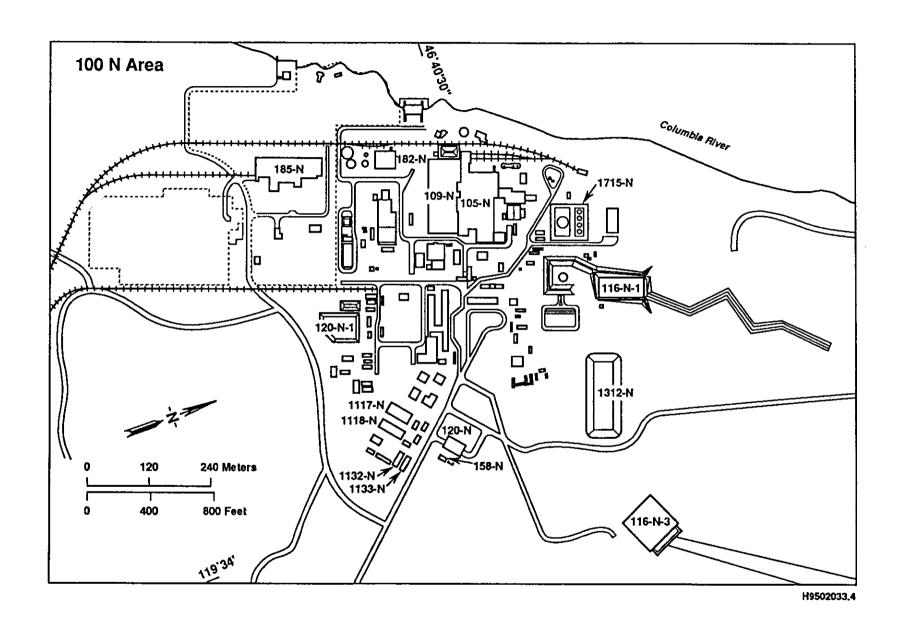
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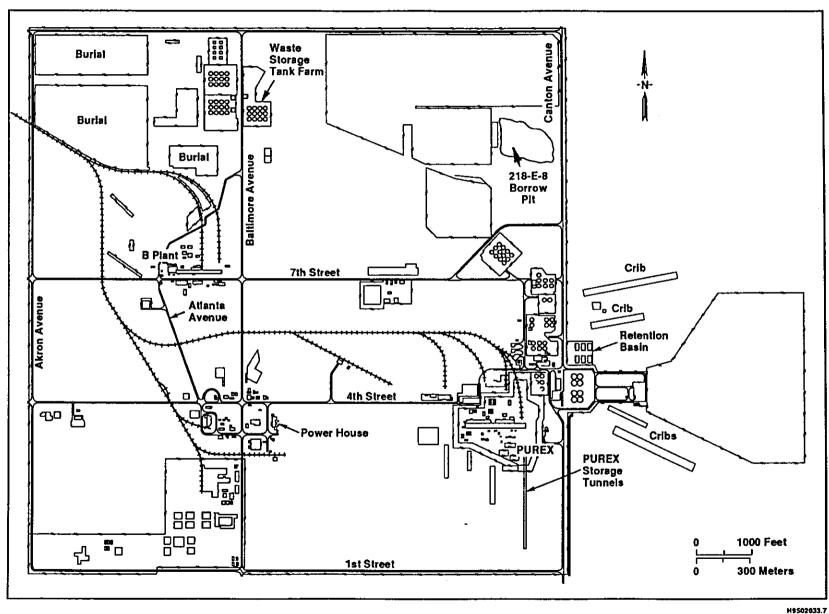


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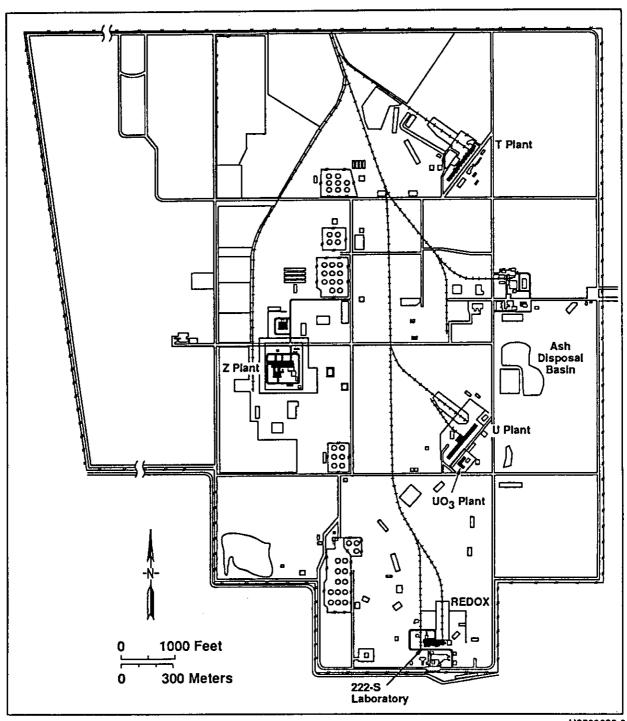
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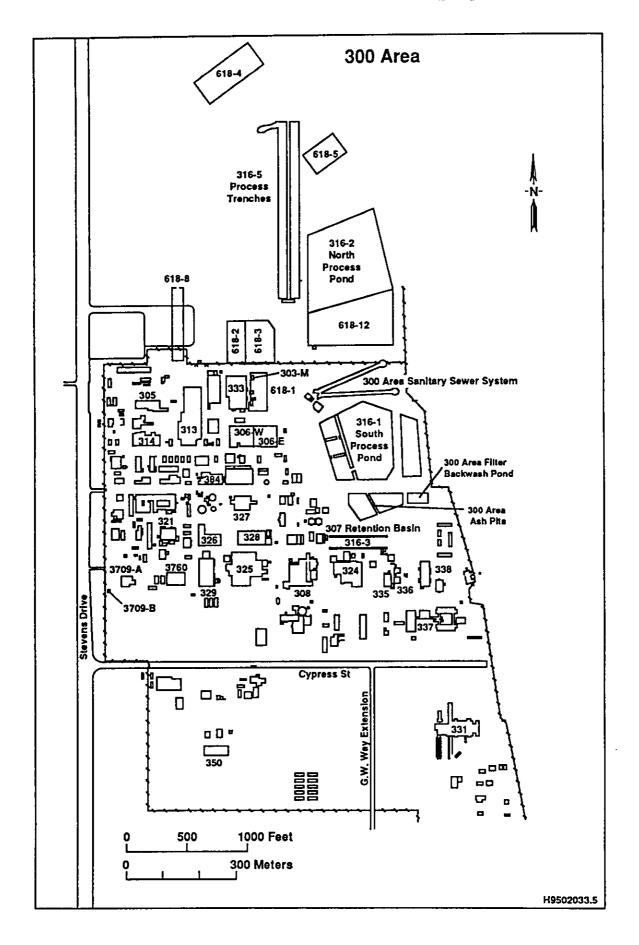
200 East Area



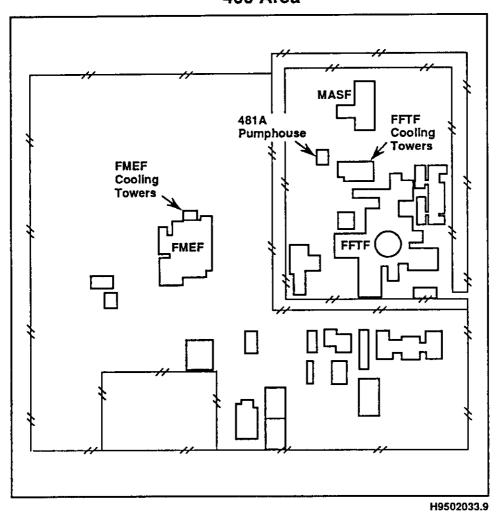
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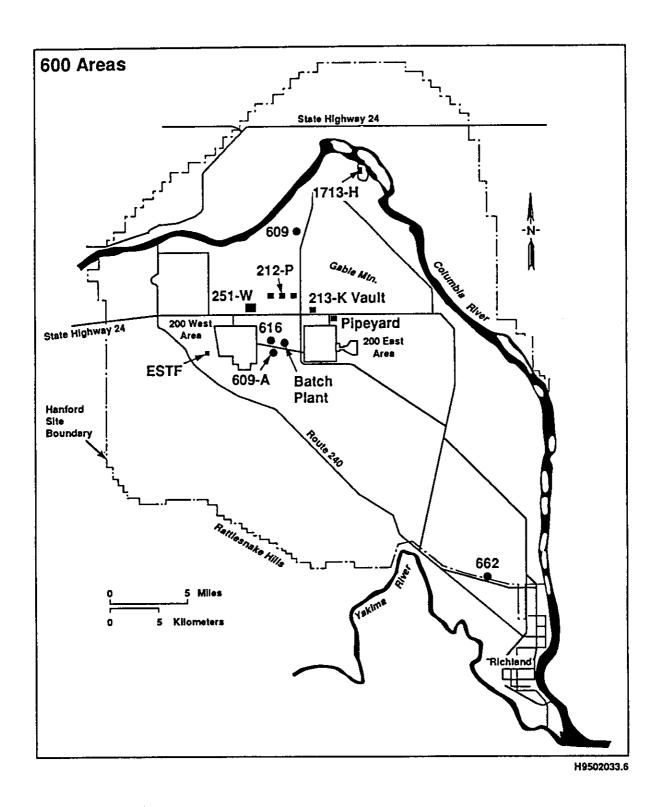


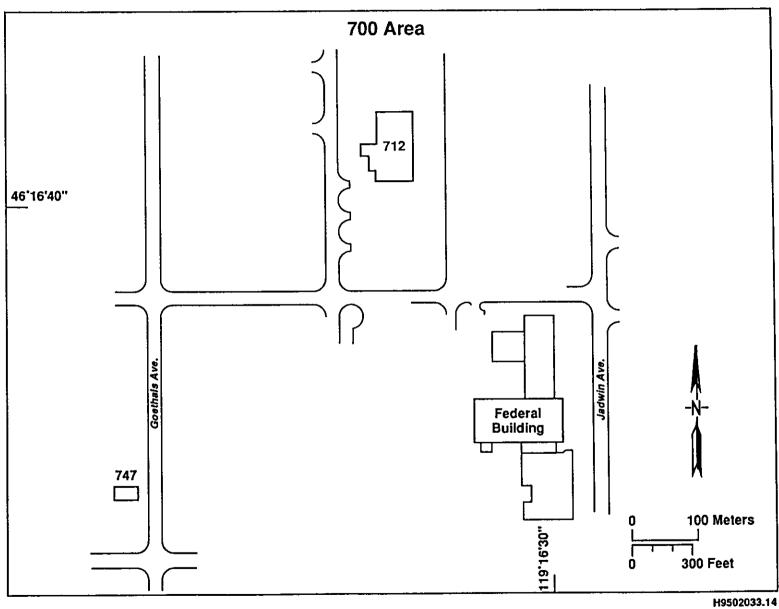
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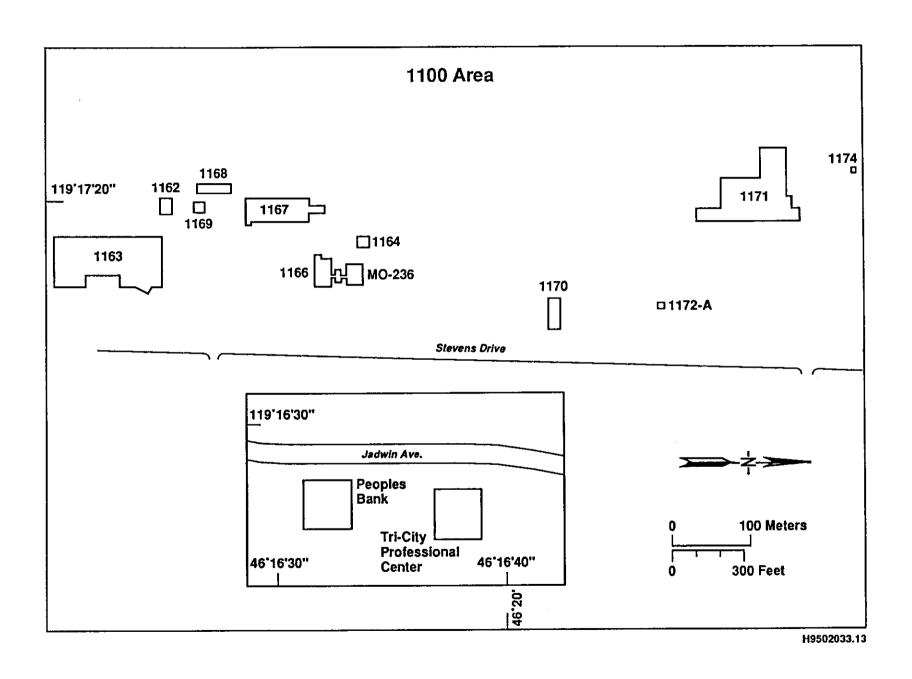


400 Area

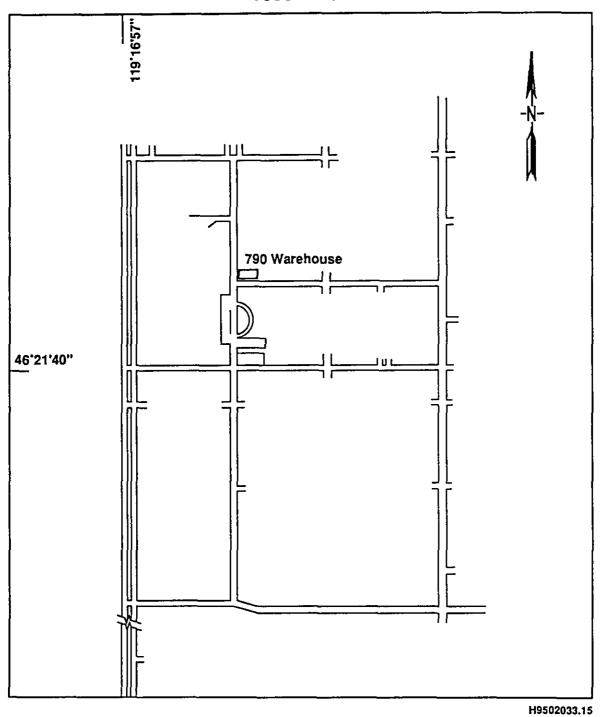




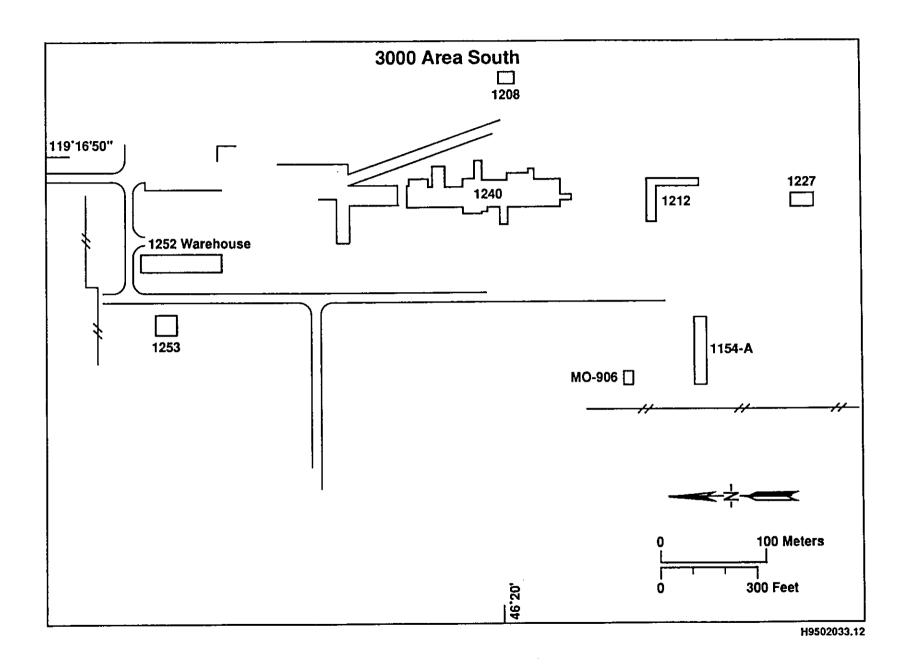




3000 Area North



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March 1995

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